



THE MONTANIAN

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# An open letter to the EPA

Editor:

The following letter dated, June 12, 2003, was written with the intention that I would present it at the Community Advisory Group (CAG) meeting if it were necessary. At this June meeting, we were being honored with the presence of a gentleman by the name of Mike Cook, EPA's overseer of Superfund sites across America.

After 3½ years of dealing with this issue, I had become accustomed to hearing all but commitment and then having to fight for the funding to get our town, our environment cleaned up; funding was the topic at hand.

After hearing Mr. Cook's heartfelt commitment that he would do all that he could do, to make sure that the needed funding would come, as needed, I no longer felt the need to present my plea forward.

I have now presented the letter at the Nov. 13, 2003, CAG meeting; the need has once again reared its ugly head as we once again have been informed of funding shortfall for the cleanup budget.

Dear EPA:

If my childhood memory serves me right, I believe that my grandfather, John W. Baker, was diagnosed with cancer of the liver. Then by some miracle, we thought, his cancer went away, without treatment. His death was recorded a short time later as heart

failure, as I recall. As an adult today in Libby, I question all this, knowing that my grandfather worked for Zonolite & Co.

Since our enlightenment in the past 3½ years, I learned that my uncle Morland Baker died of mesothelioma. He worked for Zonolite for two years. He died as a fairly young man.

My dad died at age 64 after having to tote an oxygen bottle around everywhere he went. He had asbestosis and probably lung cancer. His heart stopped too. He worked for Zonolite Co. and W.R. Grace off and on over the years. My mother endured cancer treatment and dialysis for the last 10 years of her life. She got to wash a miner's clothes. My six siblings and myself were all exposed as children and show clinical signs of exposure.

As we increase in age, so increases our risk of developing mesothelioma and we wonder how long before our pleural thickening turns to full-blown lung dysfunction.

As we wait for the EPA risk assessment, we acknowledge that our fiber is of the amphibole family, which contains a fiber type "crocidolite" known to be 500 times more mesothelioma-potent than the commercial type fiber "chrysotile," not 10 times, not 50 times, that is, 500 times more disease-potent. It is expected that our fiber is really ugly stuff. We see with our eyes what it does to our

people; we see what the science says, really ugly stuff, this mineral fiber that we've been subjected to.

My brother recently underwent surgical treatment for a cancer, successfully we pray, a cancer so rare that there are only 400 cases in America recorded per year. Was this cancer a result of his childhood exposure?

Asbestos fibers have been recovered from almost every tissue in the human body, given that the scientists got it right, a known complete carcinogen.

We have 1,500 people out of 6,500 x-rayed showing pleural abnormalities on x-ray. We know that 85-to-90 percent of pleural plaques will be missed when only x-ray is used as the detection tool. We know that 80 percent of people who develop mesothelioma do not also have an accompanying diagnosis of "asbestosis." Meaning that an exposed person is at risk of developing mesothelioma even if there are no clinical signs of exposure. We know that a threshold level of exposure below which mesothelioma will not occur has not yet been identified. We don't know how little of exposure it takes to produce this incurable cancer. We also know that these fibers are bio-persistent and exposures are accumulative. Extremely low level exposures, when repeated, in time add up to the equivalent of a high exposure and there is evidence that at least low level, episodic exposures, continue

in Libby.

We want the exposures to stop as soon as possible. HEPA vacuums need to be distributed in Libby today, when the risk of exposure is the greatest, not after the cleanup is finished. There is no funding, but common sense and need says that there should be. Jim Christensen didn't get all the funding he requested, so therefore, household exposures will continue needlessly.

The question is: Will we proceed forward addressing these issues, utilizing the science, incorporating common sense, acknowledging the need and what is right; or do we proceed with the idea that politics and money should dictate our outcome.

Last I heard, we have over 400 people who live here, trained and ready to go to work on our cleanup. We have a huge amount of work that needs to be done, and done thoroughly. Libby needs that clean bill of health as soon as possible. The future of our town depends on the thoroughness of the cleanup and that date of completion. So, rather than talk of making due with less resources, I would suggest that we discuss increasing the funding here to address the need.

We are way tired of the exposure. To deny adequate funding is to deny us of our rights as American citizens.

Clinton Maynard, Libby